

SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 17, 1997.
AMOUNT DUE ON OR BEFORE 9/17/97: \$550 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$750.)

PROFIT
CORPORATION
ANNUAL REPORT
1997



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P96000081229 (2)

1. Corporation Name
SEVEN MARY THREE, INC.

Principal Place of Business
631 PALM SPRINGS DRIVE #117
ALTAMONTE SPRINGS FL 32701

Mailing Address
631 PALM SPRINGS DRIVE #117
ALTAMONTE SPRINGS FL 32701

APPROVED
AND
FILED
97 JUL 30 AM 9:31
SECRETARY OF STATE
TALLAHASSEE, FLORIDA



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business
21 21835 Lake Seneca Rd.
Suite, Apt. #, etc.
22
City & State
23 Eustis, FL
Zip
24 32726
Country
25 USA

2a. Mailing Address
26 111 Second Ave. NE
Suite, Apt. #, etc.
27 Suite 1200
City & State
28 St. Petersburg, FL
Zip
29 33701
Country
30 USA

3. Date Incorporated or Qualified 10/01/1996
3a. Date of Last Report N/A
4. FEI Number 59-3403673
Applied For
Not Applicable
5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution ☐ \$5.00 May Be Added to Fees
8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. ☒ Yes ☐ No

9. Name and Address of Current Registered Agent
MASSARONI, DARREL R
631 PALM SPRINGS DRIVE #117
ALTAMONTE SPRINGS FL 32701

10. Name and Address of New Registered Agent
81 Name Massaroni, Darrel R
82 Street Address (P.O. Box Number is Not Acceptable) 21835 Lake Seneca Rd.
83
84 City Eustis FL 85 Zip Code 32726

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP
<input type="checkbox"/> DELETE			
<input type="checkbox"/> DELETE			
<input type="checkbox"/> DELETE			
<input type="checkbox"/> DELETE			
<input type="checkbox"/> DELETE			

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	1.2 NAME	1.3 STREET ADDRESS	1.4 CITY-ST-ZIP
<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition	D Jason Ross	21835 Lake Seneca Rd.	Eustis, FL 32726
<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition	D Jason Pollock	21835 Lake Seneca Rd.	Eustis, FL 32726
<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition	D Giti Khalsa	21835 Lake Seneca Rd.	Eustis, FL 32726
<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition	D Casey Daniel	21835 Lake Seneca Rd.	Eustis, FL 32726
<input type="checkbox"/> Change <input type="checkbox"/> Addition			

100002257951--9
-08/05/97-0105 Change 000
****165.00 ****165.00

14. I do hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the registered or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: DARREL R. MASSARONI: 7/22/97 352 483-0355

CR2E034 (4/97)